

Moving Toward a Person-Centered HCBS Delivery System in CO

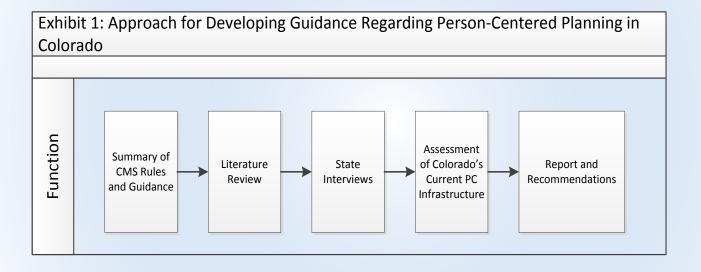
Summary of the Report and Findings Regarding Person-Centered Approaches in Colorado's Long Term Supports and Services System

Project Overview



- Delivery of a report to share with stakeholders concerning person-centered (PC) thinking and promising practices
- Report to look at the following:
 - A literature review with a summary of the common themes
 - A summary of person-centered planning requirements included in recently published Centers for Medicare & Medicaid Services (CMS) final regulations
 - A synthesis of the successes, lessons learned and challenges with implementing person-centered infrastructure
 - An assessment of the degree to which a person-centered approach is incorporated into Colorado's HCBS delivery systems
 - Recommendations for advancing person-centered approaches in Colorado

Approach to Project







OVERVIEW OF PC APPROACHES

Early Development



- Person-centered practices grew out of principles of normalization as a means to assist with supporting people with ID leaving state institutions for community living during the 70's, 80's.
- Four primary approaches developed between late 70's and mid 80's and provided the basis for most of the current approaches.
- This evolving vision for person-centered planning approaches included:
 - Finding out what mattered most to the person
 - Recognizing individual uniqueness
 - Reviewing the quality of plans
 - Incorporating the view of skilled providers
 - Dealing with conflicts about what should happen
 - Organizational change
 - Bridging personal relationships

Evolution in 1980's and 1990's



- The number of independent approaches grew from four to eleven during the mid 80's and early 90's. Many of these are still used or are being adapted.
- While plan development continued to be a focus, a larger context began to emerge. This was led by Michael Smull and Susan Burke-Harrison (University of Maryland).
- What emerged was an integration of person-centered thinking into the broader work of agencies and staff.

From PC Planning to PC Thinking



...something that virtually everyone who touches a person needs to know because change is most powerful when all staff use person-centered thinking tools in their roles, rather than relying solely on person-centered planning facilitators to create plans.

-Michael Smull

HCBS Strategies, Inc. October 2014

Comparing the Differences in Plan Development Approaches

Traditional

- Case manager leads a team
- Occurs at time/location set by CM or provider
- Focus on what is important for the person based on assessments done by professionals
- Plans reflect what can occur within existing programs
- CM and team determine effectiveness of plan over time

Person Centered

- Individual directs and CM assists/facilitates
- Convenient to individual
- Balance of "important to" and "important for"
- Plans reflect interests, qualities and preferences unique to person. Some may seem "out of reach".
- Individual, informed by team, evaluates plan success and shapes changes to improve outcomes



Commonly Used PC Techniques for Plan Development



"Windows for Change" – searches for opportunities for person to take on valued social roles

Essential Lifestyle Planning

Looks at everyday life using a balance of what is "important to" and "important for" the person

Planning Alternative Tomorrows with Hope (PATH)

Uses engagement/enrollment of others to find positive goals, build on strengths, and find a workable strategy

Making Action Plans (MAPs)

Group process for clarifying gifts and contributions and specifying conditions for opportunities

Facilitated Discovery

Used mostly in customized employment to systematically ask "Who is this person" – frequently used with people who have failed in using other methods

Wheelpower

Used by self-advocates to build wheels that illustrate current involvement in valued social roles, finds common areas of overlap, and build vision for the future





CMS HCBS REGULATION REQUIREMENTS FOR PC PLANNING

Highlights

- Person-centered planning is one component of the new Medicaid HCBS Rule*
- States must demonstrate compliance with new Rule upon waiver renewal
- Person-centered planning should not be confused with:
 - New HCBS setting requirements
 - Self-directed services (although these services include a personcentered planning process)



^{*} www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Supports/Home-and-Community-Based-Services/Home-and-Community-Based-Services.html

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The person-centered planning process must....

Be directed by the consumer to the maximum extent possible

Provide necessary information and support to the consumer to make decisions and lead the process*

Include a participatory role for the consumer's representative

Include people chosen by the consumer in the planning process

^{*} Including choices regarding services and supports the individual receives and from whom

The person-centered <u>planning process</u> must...(cont'd)

Include a method for the consumer to request updates Be timely and occur at times and locations that are convenient for the consumer

Reflect the consumer's cultural considerations

Provide information in plain/accessible language

Include strategies for solving conflict/disagreement within the process

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The person-centered service plan must...

Include consumeridentified goals and desired outcomes Identify consumer strengths and preferences

Identify consumer clinical and support needs

List alternative HCB settings considered by consumer

Confirm that the consumer chose the setting where s/he resides

Include services and supports (natural/unpaid, paid, self-directed) and their providers

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The person-centered service plan must...

Identify risk factors and measures in place to minimize them

Prevent provision of unnecessary/ inappropriate services/supports

Include additional information if certain conditions of a provider owned/operated setting are modified

Be written in a plain/accessible manner

Be distributed to the consumer and other people involved in the plan

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Be finalized and agreed to, including...

- Consumer's written informed consent
- Signatures of all individuals and providers responsible for plan implementation
- Identification of the individual and/or entity responsible for monitoring the plan

Be reviewed and revised...

- Annually at a minimum
- Upon reassessment of functional need
- When the consumer's circumstances or needs change significantly
- At the consumer's request

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Requirements of Special Note for CO



- The person-centered plan must be based on a person-centered approach
 - Implies that all processes leading up to plan development must also be based on person-centered thinking and approaches
 - Current efforts to change intake, triage, and assessment processes in CO provide key opportunity to meet requirements

Requirements of Special Note for CO (contd.)

B

- The individual will direct the plan development (and will be supported to do so)
 - Changes the case management (CM) role to assisting and facilitating individual to direct planning versus CM making the decisions or leading the plan development
 - Raises questions about information, training or coaching that should be offered to individuals for empowering them to better direct the plan development

Requirements of Special Note for CO (contd.)



- Critical supports in the CM infrastructure will be needed
 - The reimbursement for staff conducting assessments and developing plans should reflect the increased requirements for how plans are developed
 - The skills someone will need to facilitate the new person-centered process are very different than traditional assessment and case management skills.
 New training will be needed and staff performance evaluations will need to reflect these new skills



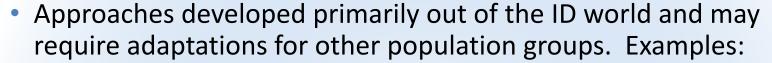
TRENDS AND PROMISING PRACTICES

Trend 1: Person Centered Thinking



- Requires organization-wide commitment
- Reflected in business processes at the individual and organizational levels. For example:
 - Individuals direct plan development
 - The organization actively supports individuals to direct planning
- Person centered outcomes. For example:
 - Individual plans and services reflect a balance of "important to" and "important for" goals/services and changes are identified so that these goals are met
 - Staff and others working with the individual know what is important to the person and what he/she wants for the future
 - Organizational quality management strategies are built on outcomes that are defined in person-centered terms

Trend 2: Adapting PC Approaches for Population Groups



Older Adults

- "Futures planning" should reflect differences in life quality and expectancy as compared to younger individuals
- Health issues may feel dominating to the person, so that other life dimensions tend to fade away – these dimensions should be included
- Age related illnesses, such as dementia or other debilitating conditions, may call for special adaptations
- Promising practices, such as adapted approaches and online tools, are available to help guide professionals and organizations

Mental Health

- Recovery models vs. support models
- Professional decision making vs. client directed planning
- Promising practices included shared decision making models



Trend 3: Organizational Performance Measures

- Measuring organizational infrastructure through the lens of personcentered performance indicators
- Council on Quality and Leadership: What Really Matters Initiativecontains 34 indicators within 8 key factor areas of organizational performance
 - Person-centered assessment and discovery
 - Person-centered planning
 - Supports and services
 - Community connection
 - Workforce
 - Governance
 - Quality and accountability
 - Emerging practices in individual budgets
- ACL also engaged in SEP/NWD enhancements with eight states for person-centered options counseling. National curriculum being developed through Boston University and University of Minnesota



Integration of PC Approaches into Program Operations

- STRATEGIES
- Person-centered thinking is being incorporated in system level operational design (e.g., intake, assessment and support planning functions and standards)
- Reports by PC experts suggest that not all "best practice" approaches are system wide answers
- Reports recommend that practices that cannot be scaled up beyond 15% should not become expected practice (e.g., required practice, regulations or other standards applying broadly)
 - However, elements can inform expected practice
- Also need to look at the interaction of the expected practice with other parts of the system
 - May indicate the need for a broader system re-design

Evaluating Proposed Approaches for Program Operations

- How does it contribute to the desired outcomes for the system?
- What skills, actions, activities and/or structures are required for success?
- What training and technical assistance is necessary?
- Are changes in system structures or practices needed?
- How big of an answer do we think this is what percentage?
- Is on-going support needed for those who are implementing?
- What is the cost of using the approach at scale?



Other State Examples



- New Hampshire (Susan Fox and Patty Cotton)
 - Person-centered skill development for all ADRC workers including a mandatory orientation and an optional five day intensive workshop
 - Online tool for adults to develop "my story" for use with physicians, social workers, providers or others. Includes history of significant events and capacity for person to track changes over time.
- Minnesota (Angela Amado)
 - Online training system that includes units on person-centered planning and service provision
 - One of the primary contractors for ACL in developing and implementing new curriculum to enhance person-centered options counseling efforts
 - Involved in other regional system efforts, such as ones in South Dakota and Ohio

Other Promising Approaches (cont.)

- Washington (Susan Shepherd and Amy Fink)
 - One of the enhanced options counseling grant recipients
 - Developing new tools to assist people in directing the development of a plan for their LTSS needs
 - New and expanded tools used for access processes
 - Self-service tools
 - Expanded ADRC coverage
 - Presumptive eligibility
 - Action plan evaluation (pre and post)





ENHANCING COLORADO'S USE OF PERSON-CENTERED PRACTICES

High Level Review of CO



- Reviewed Colorado's status on two scales:
 - Status of overall LTSS approaches in comparison to best practices
 - Ability to comply with new federal regulations
- For each of the above, the report identified the performance measure expected and examples of practice looked for in the review
- The measure and examples are then compared against current practices in Colorado
- Recommendations for improvements toward meeting each measure are then provided
- Overall conclusions drawn from the review provide a general map for how Colorado might approach enhancements in person-centered approaches at a system level

CO Review (Contd.)

STRATEGIES

- Reviewed the following system operational components
 - Strategic vision for person-centered system
 - Incorporating person-centeredness into access process
 - Making planning process more person-centered
 - Allowing services to be more person-centered

Example From Report



PC Systems Component	Examples	Infrastructure in Colorado	Rating	Recommendation			
Strategic Vision for a PC System							
Development of PC thinking/ system	Policy statement or other published statements committing to PC Thinking and approaches	Senate and House passed a resolution in 2013 committed to person centered thinking. Community living advisory group has drafted recommendations to the department that include PC approaches.	2	Develop an agency values statement for person centered thinking to be used as a guiding principle.			

General Findings Included:



- While CO is making considerable efforts to incorporate PC into operations, no strategic vision or plan has been developed to ensure common understanding of what should occur and how decisions in one component will effect another
- Foundational pieces are being advanced through initiatives,
 but lack of common language and understanding about PC
 could make efforts uneven and ineffectual
- There is wide variation in local agencies' understanding and practice of person-centered practices

Findings in Relation to Federal Requirements

- Reviewed the following
 - Colorado's status for compliance with each regulatory requirement
 - Areas where activities relating to the requirement occur and where they would be addressed for coming into compliance
 - Includes recommendations for meeting each regulatory requirement



Example from Report

Rule Requirement	Component in Existing System	Where to Address	Recommendation
Requires waiver applications to include provisions for a person centered plan that is developed based on a person centered approach	Not currently included specifically in waiver plans	Other	Incorporate person centered approaches into access business operations and support planning.
A person centered plan is defined to include a process led by the participant (or legal representatives), other individual chosen by the participant and must include: *support to participant for directing the planning *cultural considerations *process for conflict resolution	Used in consumer directed programs; approaches are not standard so practice varies; traditional service waivers do not generally use this process.	Support Plan	 Expand participant directed planning to non-consumer directed programs. Modify tool and protocol used for support planning to include person centered approaches required by the regulations.



Findings Included:

- STRATEGIES
- Considerable change will be required to ensure clients direct and engage in plan development. This includes substantial changes to roles and functions of case managers
- New requirements will substantially increase time required to be spent in plan development. Case management caseloads and reimbursement will need to be addressed
- Service plan content will need adaptations to ensure the required content is present for all population groups
- The new assessment process and tool is a critical factor for meeting the requirements for the plan development and content

General Recommendations



- Recognize that person-centered thinking is an overall approach rather than a collection of initiatives
- Place person-centeredness on par with other major considerations that drive decisions (e.g. federal compliance, impact on costs, effects on health and welfare)
- Develop a clear statement of vision and a general understanding about what a person-centered system should be
 - Although "person-centered" was a term frequently used by State staff, local agencies, and other stakeholder, the meaning of the term and opinions about how it should impact the system varied widely
- Development of a strategic vision and plan is an essential and foundational piece for enhancing Colorado's use of personcentered approaches

Recommendations for Creating a Strategic Vision and Plan

- 1. Develop a transitional plan for complying with federal regulations
 - Should include short term steps for basic compliance followed by longer term enhancements that are consistent with the strategic vision developed
- 2. Develop and provide ongoing support for changes to the assessment process and tool (already underway)
- 3. Develop a five year implementation plan that includes:
 - An assessment of system performance consistent with person-centered thinking
 - Identification of priorities for enhancement consistent with the strategic vision and goals.
 - Implementation plan for changes, including objectives, action steps, timelines, and responsible party
 - Quality management plan that establishes processes for discovery, remediation and improvement of the infrastructure in terms of meeting the vision and goals for a person-centered system



Recommendations of Creating a Strategic Vision and Plan (contd.)



- Build capacity at State and local levels by increasing understanding and skills in person-centered thinking and approaches
 - Development of a public statement, consistent with the Legislative resolution, regarding the State agency's commitment to personcentered thinking, including placing this statement on websites or other materials issued from the State;
 - Identify "champions" to provide leadership on person-centered thinking and approaches at the State and local agency levels.
 Provide enhanced training or other access to information so that a network of informed individuals can be built and can provide assistance with the implementation plan;
 - Develop and/or use existing external advisory groups to help focus on person-centered thinking and approaches. Consider options for broadening consumer experience and insight into the shaping of reform efforts.



Questions and Discussion?